
Purpose	Describe the time at which receipt of benefits are to end and how long final benefits are given for clients determined to be ineligible.
When Benefits End	Benefits for WIC clients are terminated when a client is determined to be ineligible.
Definition of Benefit Month	<p>Every WIC client receives a certain number of months of benefits based on their category of eligibility. In Nebraska these months are called benefit months.</p> <p>A benefit month is defined as the 30-day period of time for which checks or benefits are issued in the WIC computer system. A benefit month is not the same as a calendar month.</p> <p>A client's first benefit month begins the day they are certified. The beginning date for the second benefit month is the first day of certification + 30 days. Each following benefit month begins 30 days later. This beginning day for each benefit month corresponds with the "first date to use" listed on the client's WIC checks.</p> <p>The ending day of each benefit month is identified as the "last date to use" which is also listed on the client's WIC checks.</p> <p>The beginning and ending dates will not always be the same day from benefit month to benefit month since not all calendar months have the same number of days.</p>
Using Benefit Month to Issue Checks to Clients Determined Categorically Ineligible	<p>At the end of eligibility clients must receive benefits through the last day of their benefit month. The benefit month and the date of birth for a child turning five or the infant's date of birth for a postpartum woman are used to determine when the last set of checks should be issued.</p> <p>Termination of benefits for those clients found to be categorically ineligible is based on the timing of their current benefit month and the date of birth for a child turning five or the infant's birth date for a postpartum woman. If a client is found to be categorically ineligible before the last day of their current benefit month (meaning the date of birth falls within the benefit month) they do not receive any additional benefits/checks. If the client is found to be categorically ineligible in the benefit month following</p>

Using Benefit Month to Issue Checks to Clients Determined Categorically Ineligible (cont.)

the one they are currently in (even if only by one day) they receive one more month of checks.

The following are examples of using benefit month to issue checks to clients who have been determined categorically ineligible.

If today is:	And a:	And the last checks they received:	Then:
The 7 th of the month.	Child who turns five on the 10 th comes in to pick up checks	Expired on the 7 th which is before the child turns five years old	You would issue one month's benefits to the child.
The 17 th of the month	Child who turns five on the 10 th comes in to pick up checks	Expired on the 15 th after the child turned five years old	You would not issue any benefits.
The 15 th of the month	Breastfeeding woman, whose infant is 8 months old, tells you she has stopped breastfeeding when she comes to clinic to pick up checks	Expire on or before the date of the clinic visit	You would issue one month's benefits to the woman.
The 28 th of the month	Family who is being recerted is found to be over income	Expire any time	You would not issue any benefits.
The 28 th of the month	Family tells you they are over income	Expire on or less than 15 days after the clinic visit	You would issue one month's benefits
The 20 th of the month	Postpartum woman whose infant was six months on the 17 th comes to clinic	Expired on the 16 th	You would issue one month's benefits.
The 20 th of the month	Postpartum woman whose infant was six months on the 17 th comes to clinic	Expire on the 20 th	You would not issue any benefits.

Client's Who Receive Additional Benefits

The following list shows client's who receive additional benefits after ineligibility is determined. These clients would be issued one benefit month of checks after ineligibility is determined.

**Client's Who Receive
Additional Benefits,
(Cont)**

- ◆ Current clients found ineligible during a certification period
- ◆ Woman who stops breastfeeding and whose infant is less than six months of age.
- ◆ Clients who are found ineligible during a certification period for the following reasons:
 - ◆ Increase in income;
 - ◆ Moving outside the state of Nebraska;
 - ◆ Voluntary withdrawal;
 - ◆ Program funding shortages requiring discontinuation of program benefits.
 - ◆ Excessive accumulation of sanction points.
- ◆ Breastfeeding woman whose infant is receiving greater than ½ the amount of formula provided to a fully formula fed infant. These women would continue to receive health & nutrition education and referrals until their infant is 1 year of age or they quit breastfeeding.

**Client's Whose
Benefits Depend on
Benefit Month and
Check Expiration
Date**

The following list shows clients who are determined categorically ineligible.

- ◆ Child who turns five years of age;
- ◆ Woman six months postpartum;
- ◆ Woman whose infant is 6 months of age or older and who is no longer breastfeeding;
- ◆ Breastfeeding woman whose infant is one year of age;

These clients receive an additional benefit month of checks if the date of ineligibility is after the last day of the current benefit month (last date to use on the current checks). Conversely a client whose date of ineligibility is before the last day of the benefit month would not receive additional benefits.

**Clients Determined
Ineligible Who Do
Not Receive
Additional Benefits**

- ◆ A formerly pregnant client who at six weeks postpartum is not recertified.
- ◆ Clients who have been determined to be dual participating. Benefits end immediately at all clinics and/or programs in which they are participating.
- ◆ Clients terminated due to abuse of the program as outlined in 246.12 (u)(2) and 246.2.

**Client's Who Have
Received Extra
Benefits**

Clients who have received checks for two months and are found to be ineligible, must return those checks for the month in which they are found to be ineligible, to the local agency.

**Continuation of
Benefits During
Appeal of
Termination**

Clients who appeal the termination of benefits within the 15 days advance notice period, and are within a current certification period, continue to receive checks until the hearing official reaches a decision, or the certification period expires, whichever occurs first.

Applicants denied benefits at their initial certification or due to expiration of their certification, who appeal, shall not receive benefits.
